

**FY2007 Application**  
**School-Community-Arts-Parents Partnership Program (SCAPP)**  
**Intent to Apply Deadline: January 15, 2006 (Required)**  
**Application Deadline: February 15, 2006**

**THIS FORM MUST BE TYPED.** No handwritten applications will be accepted. Please refer to the guidelines and instructions.

<b>I. APPLICANT</b>	School Name
US Congressional District	Street Address
KY Senate District	City State Zip Code - Plus 4 County
KY Congressional District	Principal Salutation <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr.         Principal/Superintendent Name
To lookup district info, use <a href="http://www.vote-smart.org">www.vote-smart.org</a> or Call your County Clerk's office.	School Phone # Summer Phone # FAX #
	E-Mail Address Web Address
<b>II. TEAM INFO</b>	Team Contact Person Salutation & Name
	Summer Address
	City State Zip Code - Plus 4 County
	Summer Phone # Team Contact Person E-Mail
List each Partners' name, title and affiliation:	

<b>KAC Staff Use ONLY</b>			
FY: <u>2007</u>	APP #: _____	CLIST #: _____	
App Status: _____	App Institution: _____	App Discipline: _____	
Grantee Race: _____	Project Disc: _____	Activity: _____	
Project Race: <u>99</u>	AIE Percent: _____	AIE Description: _____	
Grant Program: <u>SCAPP</u>	# Youth Benefit: _____	Application Date: _____	

I understand that first year programming occurs between 8/1/06 and 6/30/07	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I understand that first year funding from KAC is \$3,000.00	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I understand that the Partnership's first year cash match is \$1,500.00	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Sources(s) of your cash match: _____		
Total KAC funding received last year (all categories): _____		
Check only One <input type="checkbox"/> that best represents 50% or more of staff and administration (not students)	<b>Grantee Race / Ethnicity:</b> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> American Indian/Alaska Native  <input type="checkbox"/> Native Hawaiian/Pacific Islander  <input type="checkbox"/> Hispanic/Latino         </div> <div> <input type="checkbox"/> Asian  <input type="checkbox"/> Black/African American  <input type="checkbox"/> White         </div> </div>	
<b>Applicant Status</b> _____	Please choose <b>ONE</b> that best describes the specific type of school (Schools will generally be in the following categories: <b>[02] Organization – Non Profit</b> , for a private school; <b>[07] Government – County</b> , for a county school; & <b>[08] Government – Municipal</b> , for a city school.) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">02 Organization - Non-Profit</div> <div style="width: 33%;">07 Government - County</div> <div style="width: 33%;">09 Government - Tribal</div> <div style="width: 33%;">05 Government - State</div> <div style="width: 33%;">08 Government - Municipal</div> <div style="width: 33%;">99 None of the Above</div> <div style="width: 33%;">06 Government - Regional</div> </div>	
<b>Applicant Institution</b> _____	Please choose <b>ONE</b> : <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">19 School District</div> <div style="width: 33%;">24 Vocational-Technical School</div> <div style="width: 33%;">49 Arts Camp/Institute</div> <div style="width: 33%;">21 Elementary School</div> <div style="width: 33%;">25 Other School (Pre-school)</div> <div style="width: 33%;">50 Social Service (FRC)</div> <div style="width: 33%;">22 Middle School</div> <div style="width: 33%;">48 School of the Arts</div> <div style="width: 33%;">99 None of the Above</div> <div style="width: 33%;">23 Secondary School</div> </div>	

**Proposed School-Community-Arts-Parents Partnerships must include:**

- A School with a demonstrable commitment to arts education.
- Partners representing the community (a business, government, social service organization) an arts organization and a parent organization (PTA, PTO) or an individual parent or parents. Any team unable to find an arts organization partner may consult with SCAPP Program Director John S. Benjamin to discuss choosing an individual artist who is enthusiastic about arts education and working with young people.
- Commitment on the part of five or six team members to actively participate in a team training conference and attend at least four planning meetings during the project year.
- Evidence that the team includes those with the potential for design and implementation of action plans that form lasting partnerships that will benefit all partners
- The potential to design and execute an exemplary program.

- Demonstrable willingness by partners to contribute to: the cost of participation, implementation of the plan and follow-up.

### ***Instructions for Completing Narrative***

To assist panelists in reading your application, duplicate the heading of each subject and performance expectation (e.g. “**Description of your school**”) before your response to that item. Also use bullets where indicated. Place the school’s name and the words “School-Community-Arts-Parents Partnership Program” in the upper right-hand corner of each page.

### ***Narrative Outline***

Please respond to the Introduction and each of the Performance Expectations on a total of three single-sided pages or less. Include complete information on each bulleted item, in the order below, when writing your narrative. The panel will score each performance expectation.

### ***Introduction***

#### **Description of your School**

- Briefly describe your school, including history, Comprehensive Plan, programs and accomplishments
- Briefly describe your school’s role in your community

### **Performance Expectations**

Your application will be reviewed using the following performance expectations:

#### **1. Potential for Success (40%)**

- Describe how each partner’s participation will help to complete an effective team with the potential for lasting partnerships that will benefit all partners
- Describe each partners’ previous experience with collaborations

#### **2. Previous Arts and Arts Education Experience and/or Support (15%)**

- Describe your school’s Comprehensive Plan, arts education programs and arts opportunities for students
- Describe your business, government and/or community partners’ experience with and/or support of the arts and arts education
- Describe your parent (individual, PTA/PTO or “unofficial parent group) partner’s experience with and/or support of the arts and arts education

- Describe your arts organization partner's experience with and/or support of the arts and arts education. (If you have chosen an individual artist, after consultation with SCAPP Program Director John S. Benjamin, describe her/his experience and support of the arts and arts education)

### 3. Gathering and Responding to Evidence (25%)

**Note:** *An important goal of the SCAPP is long-term impact on all participants. To assess that impact, you will gather evidence throughout the planning, implementation, and follow-up to the program to determine progress, and to learn about and improve upon the work being done. Effective assessment will include a combination of quantitative (measured by quantity or amount) and qualitative (measured by quality or kind) measures. **Below are several examples of assessment measures that can be used when answering the questions in this section.***

- ❖ Measurement of student engagement in the program may include anecdotal observation, photo documentation, student journaling, etc.
- ❖ Measurement of teacher and parent involvement in the program and measurement of their increased ability to use the arts to support student learning may include:
  - quantitative data of the number of parents who came into the classroom, attended events, or responded to requests for at-home involvement, etc.
  - qualitative measurement such as interviews, anecdotal observation, open-ended surveys, etc.
- ❖ Documentation of activities to promote awareness of the value of arts education and arts in education may include examples of media coverage, letters home to parents, etc.

#### **Utilizing the examples above:**

- Describe the process and tools you will use to gather ongoing data about the impact of your program on all participants (increased participation, abilities, and awareness of the value of arts education and arts in education)
- Describe how partners might use the data gathered in planning for a second year SCAPP

### 4. Diversity (10%)

- Describe how the partners might work to increase the understanding of and appreciation for diversity (see KAC Values Statement in the SCAPP Guidelines and Instructions) within the school and community

### 5. Access (10%)

- Demonstrate an understanding of disabilities which may be encountered and describe strategies to ensure that everyone (teachers, students, partners & the public) is served

## School-Community-Arts-Parents Partnership Partner Commitment Form

***This form must be signed by all partners and submitted with the SCAPP application***

We the undersigned are committed to working together through the SCAPP program to design and implement action plans that will benefit all partners. We understand that we are required to attend a mandatory training and planning workshop scheduled from July 13, 5:00 pm to July 15, 12:00 pm.

### **School Representative**

Signature _____	Date _____
(Type Name) _____	Title _____

### **Arts Organization (or Artist)**

Signature _____	Date _____
(Type Name) _____	Title _____

### **Parent Representative**

Signature _____	Date _____
(Type Name) _____	Title _____

### **Community or Business Representative**

Signature _____	Date _____
(Type Name) _____	Title _____

### **Additional Partner**

Signature _____	Date _____
(Type Name) _____	Title _____

### **Additional Partner**

Signature _____	Date _____
(Type Name) _____	Title _____

## ***Application Checklist***

### **Include this application checklist as the first page of your application package**

Your application is not complete and will not be forwarded to the panel for review if it does not contain the following mandatory information:

#### **One signed original:**

- ☐ School-Community-Arts-Parents Partnership Program Grant Application and narrative
- ☐ Partner Commitment Form

#### **One copy of the following:**

- ☐ Arts Organization partner's information that will demonstrate their ability to provide strong support to this SCAPP
- ☐ If partnering with an individual artist, that artist's support materials and work samples, if not on Kentucky Arts Council Arts Education Roster through June, 2006
- ☐ Printed materials that demonstrate other non-school partners' previous experience with the arts, arts education or youth or community programs

#### **If you would like acknowledgement of receipt of your application and return of any support materials please enclose the following:**

- ☐ Self addressed, **AND** stamped #10 envelope **or** email address for acknowledgement of receipt
- ☐ Self-addressed, **AND** stamped mailer for return of supporting materials

## ***Application Signatures***

*I certify that I am legally authorized to submit this application on behalf of the school and that the foregoing statements and enclosures are true and complete to the best of my knowledge.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**All signatures must be in RED ink.**

Applicant (Type Name) \_\_\_\_\_ Title \_\_\_\_\_

### ***Mailing Address for Completed Application***

Kentucky Arts Council  
Capitol Plaza Tower, 21<sup>st</sup> Floor  
500 Mero Street  
Frankfort, KY 40601-1987